## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 \$30CT 2015

Application or Docket Number

10/554714

|  |  | CLAIMS                                      | as filed .   | Part I                                    | •                                    |                         | ,                      |                 | ~                          |                        |
|--|--|---|--|---|--------------------------------------|-------------------------|------------------------|-----------------|----------------------------|------------------------|
|  |  |   | (Colum   | n 1)                                      | (Column 2)                           | small en<br>Type        |                        | OF              | ento<br>Liams s            | r than<br>Lentity      |
| U.S. NATIONAL STAGE FEES   |  | ,   |  |   | RATE                                 | - Company               |                        |                 | = GIIII (                  |                        |
| BASIC FEE  |  |   | SMALL ENT. = 8 150   |   | LÀRGE ENT. = 8 800                   |                         | FEE                    |                 | RATE                       | FEE                    |
| EXAMINATION FEE  |  |   | Satisfies POT Article 83(1)  |   | All other situations =               | BASIC FEE               | ·                      | OF              | BASIO FEE                  | 300                    |
| SEARCH FEE   |  |   | . (4) ± § 50 / § 100<br>U.S. is ISA = § 50 / § 100<br>ALL other countries =<br>§ 200 / § 400 |   | 8 100 / 8 200 All other situations = | EXAM. FEE               |                        |                 | EXAM. FEE                  | 200                    |
|  |  |   |  |   | \$ 250 / \$ 500                      | SEARCH FEE              |                        |                 | SEARCH FEE                 |                        |
| FEE FOR EXTRA SPEC. PGS.   |  |   | mińus 100 =  |   | / 50 ≐                               | X \$ 125 =              | -                      | 1               | X \$ 250 =                 | _                      |
| TOTAL CHARGEABLE CLAIMS  |  |   | 37 minus 20 = .  |   | -17                                  | X \$ 25 =               |                        | OR              |                            | -∦                     |
| INDEPENDENT CLAIMS   |  |   | @ mlnus 3 = *  |   |                                      | X \$ 100 =              |                        | OR              |                            | 250                    |
| MULTIPLE DEPENDENT CLAIM PRESENT                                       |  |   |  |   |                                      | + \$ 180 =              |                        | -               | X \$ 200 =                 |                        |
| If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |  |   |                                      | TOTAL                   |                        | OR<br>OR        | + \$ 360 =                 | ــــــــال             |
|  | ,  | Ol Algeo an                                 | A Distance of the land   | . 1                                       | ٠                                    |                         | المستحد                | 1 01            | TOTAL                      | 1251                   |
|  |  | CLAIMS AS<br>(Column 1)                     | AMENDED  |   |                                      | Small e                 | A S S Markey           |                 | OTHER                      | THAN.                  |
| 計  | ·  | CLAIMS                                      | (Column 2) (Column 3)  |   |                                      | OWALL B                 |                        | OR              | SMALL                      | ENTITY                 |
|  | Total  | REMAINING<br>AFTER<br>AMENDMENT             |  | PREVIOUS<br>PAID FO                       | SLY EXTRA                            | PATE                    | ADDÍ-<br>TIONAL<br>FEE | -               | RATE .                     | ADDI-<br>TIONAL<br>FEE |
|  |  | -   |  | ua ·                                      | . =                                  | X \$ 25 =               |                        | OR              | X \$ 50 =                  |                        |
|  | Independent                                    | * .   | 131111111111111111111111111111111111111  | 044 ·                                     | =                                    | X \$ 100 =              | ·                      | OR              | X \$ 200 =                 |                        |
| لين  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |   |                                      | + \$ 180 =              |                        | OR              | + \$ 360 =                 |                        |
| •  | •  | ,   | ·  |   |                                      | TOTAL ADDIT.            |                        | or              | TOTAL ADDIT.<br>FEE        |                        |
| <del>-</del>   |  | (Column 1)                                  |  | (Column                                   |                                      |                         |                        |                 |                            | •                      |
| <b>X</b>   |  | CLAIMS<br>REMAINING<br>· AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUS<br>PAID FOR | PRESENT                              | RATE                    | ADDI-<br>TIONAL<br>FEE |                 | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | ¢ .   | Minus  | to  | Ė                                    | X \$ 25 =               |                        | OR              | X \$ 60 ≈                  | ree                    |
|  | Independent                                    | <b>a</b> .                                  | Minus  | th the                                    |                                      | X \$ 100 =              |                        | -               |                            |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |   | -                                    |                         | OR                     | X \$ 200 =      | •••••                      |                        |
| <u></u>  |  |   |  |   | ll                                   | + \$ 180 = TOTAL ADDIT. |                        | OR              | + \$ 860 ≈<br>TOTAL ADDIT. |                        |
|  | •  |   |  |   | •                                    | FEE                     |                        | OR <sup>1</sup> | FEE .                      |                        |
|  |  |   | •  |   |                                      |                         |                        |                 |                            |                        |

at the entry in column 1 is less than the entry in column 2, write "0" in column 3.

the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

and if the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.